



Missouri Pharmacy Program – Preferred Drug List



Beta Adrenergic Agents –Nebulized:
Effective 12/15/2004
Revised 07/06/2006

Preferred Agents

- Albuterol Sulfate
- Metaproterenol Sulfate

Non-Preferred Agents

- Accuneb®
- Xopenex®
- Airt®

Approval Criteria

Failure to achieve desired therapeutic outcomes with trial on 1 preferred agent.
Documented ADE/ADR to preferred agents.
Documented compliance on current therapy regimen.
Compliance screened transparently over previous six months

Denial Criteria

Lack of adequate trial on required preferred agent.
Therapy will be denied if no approval criteria are met.
Drug Prior Authorization Hotline: (800) 392-8030